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ANNUAL REPORT

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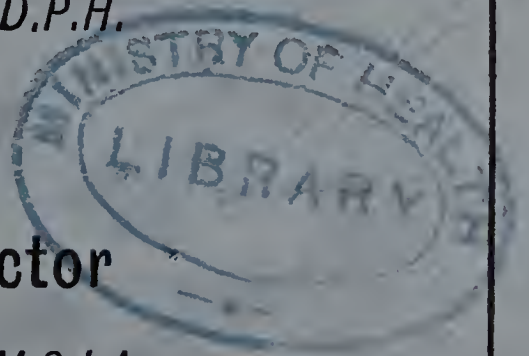
Medical Officer of Health

A. L. TAYLOR, M.D., D.P.H.

and the

Sanitary Inspector

D. WALKER, A.R.S.I., M.S.I.A.



1951

WAKEFIELD :

W. H. MILNES LTD., 16 WOOD STREET

Stanley (Yorks.) Urban District Council



ANNUAL REPORT

For the Year ended 31st December, 1951

To the Stanley Urban District Council.

GENTLEMEN,

I have the honour to present my Report for the year ended 31st December, 1951, on the Health and Sanitary Circumstances of your area.

Area : 5,169 acres.

Population, 1951 : 16,672.

Number of inhabited houses, 1951, according to Rate Book, 5,046.

Rateable Value, Year commencing 1-4-51 : £64,459.

Net product of a penny rate, Year commencing 1-4-51 : £245.

Statistics
and Social
Conditions
of the Area

The Urban District of Stanley is bounded on the South side by the City of Wakefield, on the North by the Urban District of Rothwell, on the West by the Boroughs of Morley and Ossett, and on the East by the Urban Districts of Rothwell and Normanton and the Rural District of Wakefield.

This Report will follow closely on the lines of its predecessors and as in previous years since the passing of the National Health Act, I shall give a general account of the Part III Services administered in your District, under the authority of the West Riding County Council. The information thus supplied is of considerable interest and will give you some knowledge of the diversity and scope of the public health services operating in the district.

Once again there has been a fall in the Birth Rate, which now stands at the low figure of 13·6. Whilst accepting the fact that the Birth Rate has fallen throughout the Country, nevertheless it is a matter for some astonishment that the Stanley rate should be lower than for the aggregate of Urban Districts and for the Country as a whole.

The Death Rate at 13·4 is slightly lower than that for the aggregate of Urban Districts.

Only one death occurred from Tuberculosis and it is pleasing to record that the incidence of this disease, at 0·06 per thousand population, is very considerably lower than for the rest of the Country, and the lowest ever recorded in the Stanley District.

Another source of satisfaction is the lower Infantile Mortality Rate. There is still room for improvement, but of the 9 deaths of infants under one year, 5 were from congenital causes and must be considered as virtually unavoidable.

No death occurred associated with pregnancy or child-birth, nor was there any notification of Puerperal Pyrexia.

The housing position remains unsatisfactory. Old houses are dilapidating at a rate outstripping the provision of new building. Many old houses are in occupation which are totally unfitted for human habitation. Only the very worst of these can be dealt with under Section 11, and one is compelled to acquiesce in the continuance of conditions which are bound to cause ill-health and deterioration of moral standards. In recording these facts, it is necessary to acknowledge that the problem is Nation-wide and that its solution is outside the resources of your Council. Everything that it is possible for you to do as a Housing Authority, has, I know, been done. Nevertheless, a Medical Officer of Health must draw attention to circumstances adversely affecting the health and social conditions of his area, and I should be failing in this duty if I did not once again refer to the facts just stated.

Epidemic disease was once again a factor of no significance during 1951. This field is one which is most satisfactory, and the imminent introduction of Whooping Cough prophylaxis should improve still further the position.

Throughout the year, Mr. Blakey has proved a tower of strength and his ready co-operation and intimate knowledge of your District have given invaluable help on many occasions.

Mr. Walker, your Senior Sanitary Inspector has adapted himself to his new appointment and has very obviously increased in professional stature. Relationships are close and cordial and there has been very excellent liaison in all matters appertaining to the health of your District.

Finally, I should like to express my thanks to the Chairman and Members of the Council, with whom my relationships have always been of the happiest.

I beg to remain, Gentlemen,

Your obedient Servant,

A. L. TAYLOR.

SECTION A.

Vital Statistics in 1951—Stanley Urban District.

				M.	F.	Total
Live Births	Live Births—	Legitimate	... ..	109	113	222
		Illegitimate	... ..	5	3	8
	Total		... ..	<u>114</u>	<u>116</u>	<u>230</u>

				M.	F.	Total
Still Births	Still Births—	Legitimate	... ..	4	1	5
		Illegitimate	... ..	—	—	—
	Total		.. ..	<u>4</u>	<u>1</u>	<u>5</u>

Birth Rate Birth rate (live and still) per 1,000 of the estimated resident population: 13·6.

						M.	F.	Total
Deaths	Deaths	...	...	...	..	...	...	...
						116	86	202

Death rate per 1,000 of the estimated resident population: 13·4.

				<i>Deaths.</i>	<i>Rate per 1,000 total (live and still) Births.</i>
Maternal Mortality	...	...	0		0·0
Death rate of Infants under 1 year:—					
All Infants per 1,000 live births				...	39·1
Legitimate Infants per 1,000					
legitimate live births	...	...		...	40·5
Illegitimate Infants per 1,000					
illegitimate live births			...	...	0·0
Deaths from Diarrhoea (under 2 years of age):					Nil.
Rate per 1,000 population			..	..	0·0
Rate per 1,000 live births			...	...	0·0
Deaths from Measles (all ages)			...	...	0
Deaths from Whooping Cough (all ages)				...	0
Deaths from Cancer (all ages)			...	...	19

Record of Deaths in Age Groups, 1951.

			<i>Males</i>	<i>Females</i>	<i>Total</i>
Under 1 year	..		5	4	9
1—5 years	...	...	—	—	—
5—10	„	...	—	—	—
10—15	„	...	1	—	1
15—20	„	...	—	—	—
20—25	„	...	—	—	—
25—35	„	...	1	—	1
35—45	„	...	2	3	5
45—55	„	...	10	6	16
55—65	„	...	16	18	34
65—70	„	...	12	7	19
70—75	„	...	25	16	41
75—80	„	...	27	9	36
80—85	„	...	12	13	25
85—90	„	...	4	7	11
Over 90 years...	...		1	3	4
Total	...		116	86	202

Infantile Death Rates for the past 27 years.

1925	...	...	103·0	1939	...	...	42·9
1926	...	...	98·3	1940	...	...	79·29
1927	...	...	67·3	1941	...	...	37·8
1928	...	...	81·1	1942	...	...	47·6
1929	...	...	62·3	1943	...	...	54·2
1930	...	...	65·8	1944	...	...	50·2
1931	...	...	60·2	1945	...	...	45·0
1932	...	...	84·5	1946	...	...	31·74
1933	...	...	56·1	1947	...	...	53·07
1934	...	...	85·0	1948	...	...	32·26
1935	...	...	30·1	1949	...	...	25·27
1936	...	...	34·7	1950	...	...	53·0
1937	...	...	29·4	1951	...	...	39·1
1938	...	...	69·5				

INFANTILE MORTALITY IN 1951.

Net deaths from stated causes under One year of Age.

CAUSES OF DEATH.	Under 1 Week.	1—2 Weeks.	2—3 Weeks.	3—4 Weeks.	Total under 1 Month.	1—3 Months.	3—6 Months.	6—9 Months.	9—12 Months.	Total under 1 Year.
Acute haemorrhagic Pneumonia	1	—	—	—	1	—	—	—	—	1
Asphyxia, cause not shown by evidence	—	—	—	—	—	—	1	—	—	1
Broncho-pneumonia Congenital heart disease ..	—	—	—	—	—	1	—	—	—	1
Prematurity	1	—	—	—	1	—	—	—	—	1
Multiple congenital abnormalities Congenital heart	1	—	—	—	1	—	—	—	—	1
Broncho-pneumonia Congenital spina bifida Meningocele	—	—	—	—	—	1	—	—	—	1
Anencephaly	1	—	—	—	1	—	—	—	—	1
Congenital atelectasis ..	1	—	—	—	1	—	—	—	—	1
Hydrocephalus Arnold Chiari deformity Attempted operative repair	—	—	—	—	—	1	—	—	—	1
Total ..	5	—	—	—	5	3	1	—	—	9

The number of infantile deaths, i.e., deaths of infants under one year of age, during 1951 was 9.

The Neo-Natal Mortality Rate (the mortality rate during the first month of life) for 1951 was 21·7 per 1000 registered live births.

Comparison with previous years is offered in the table below :—

1932	...	...	32·9	1942	...	...	29·3
1933	...	...	20·4	1943	...	...	33·9
1934	...	...	45·0	1944	...	...	35·5
1935	...	...	21·1	1945	...	...	30·0
1936	...	...	17·4	1946	...	...	15·8
1937	...	...	24·5	1947	...	...	19·5
1938	...	...	30·4	1948	...	...	12·9
1939	...	...	55·0	1949	...	...	7·2
1940	...	...	52·8	1950	...	...	31·8
1941	...	...	21·1	1951	..	...	21·7

Inquests.

4 Inquests and 9 Post-Mortem examinations were held in the district during the year.

Causes of Death in the Stanley Urban District, 1951.

CAUSE OF DEATH				MALES.	FEMALES.
All Causes				116	86
1.	Tuberculosis, respiratory	..	..	..	1
2.	Tuberculosis, other	..	..	..	..
3.	Syphilitic disease	..	..	..	..
4.	Diphtheria	..	..	..	..
5.	Whooping Cough	..	..	..	..
6.	Meningococcal infections	..	..	..	..
7.	Acute Poliomyelitis	..	..	..	..
8.	Measles	..	..	..	..
9.	Other infective and parasitic diseases	..	..	..	1
10.	Malignant neoplasm, stomach	..	..	2	1
11.	Malignant neoplasm, lung, bronchus	..	..	..	..
12.	Malignant neoplasm, breast	..	..	..	4
13.	Malignant neoplasm, uterus	..	..	..	..
14.	Other malignant and lymphatic neoplasms	..	..	7	5
15.	Leukaemia, aleukaemia	..	..	..	..
16.	Diabetes	..	..	3	..
17.	Vascular lesions of nervous system	..	..	17	19
18.	Coronary disease, angina	..	..	16	10
19.	Hypertension with heart disease	..	..	5	2
20.	Other heart disease	..	..	25	17
21.	Other circulatory disease	..	..	3	2
22.	Influenza	..	..	1	1
23.	Pneumonia	..	..	6	1
24.	Bronchitis	..	..	13	4
25.	Other diseases of respiratory system	..	..	1	..
26.	Ulcer of stomach and duodenum	..	..	..	..
27.	Gastritis, enteritis and diarrhoea	..	..	1	..
28.	Nephritis and nephrosis	..	..	..	3
29.	Hyperplasia of prostate	..	..	2	..
30.	Pregnancy, childbirth, abortion	..	..	..	..
31.	Congenital malformations	..	..	2	3
32.	Other defined and ill-defined diseases	..	..	8	10
33.	Motor vehicle accidents	..	..	1	1
34.	All other accidents	..	..	2	..
35.	Suicide	..	..	1	..
36.	Homicide and operations of war	..	..	..	..
Live Births. { Total				114	116
{ Legitimate				109	113
{ Illegitimate				5	3
Still-Births. { Total				4	1
{ Legitimate				4	1
{ Illegitimate				..	..
Deaths of { Total				5	4
Infants under { Legitimate				5	4
1 year of age. { Illegitimate				..	..
Population				16,690	
Comparability Factors :—					
Births				0.99	
Deaths				1.11	

Principal Vital Statistics for the year 1951.

				Stanley Urban District	Aggregate of Urban Districts	Aggregate of Rural Districts	West Riding Admin. County	England and Wales
Population	..	..	..	16690	1157200	429100	15869300	*
Births	{	Males	..	114	9376	3650	13026	*
		Females	..	116	8655	3432	12087	*
		Total	..	230	18031	7082	25113	*
Deaths	{	Males	..	116	8033	2505	10538	*
		Females	..	86	7583	2084	9667	*
		Total	..	202	15616	4589	20205	*
Deaths under one year	{	Males	..	5	327	156	483	*
		Females	..	4	228	87	315	*
		Total	..	9	555	243	798	*
Still Births	{	Males	..	4	267	103	370	*
		Females	..	1	211	87	298	*
		Total	..	5	478	190	668	*
Total Live and Still Births				235	18509	7272	25781	*
CRUDE RATES.								
Birth	..	..	..	13·8	15·6	16·5	15·8	15·5
Death	..	..	..	12·1	13·5	10·7	12·7	12·5
Infective and Para. Dis. excl. Tub. but incl. Syph. & other V.D.				0·06	0·11	0·09	0·10	*
Tuberculosis—Respiratory				0·06	0·24	0·22	0·24	0·28
Tuberculosis—Other				0·0	0·04	0·05	0·04	0·04
Tuberculosis—All Forms				0·06	0·28	0·27	0·28	0·32
Cancer				1·20	1·89	1·56	1·80	1·96
Vascular lesions of Nervous system				2·16	1·86	1·33	1·72	*
Heart and Circulatory				4·79	5·10	3·72	4·72	*
Respiratory Diseases				1·62	1·90	1·55	1·81	*
Maternal Mortality				0·0	0·81	1·24	0·93	0·79
Infant Mortality				39·1	30·8	34·3	31·8	29·6
Stillbirths				29	26	26	26	23

* Figures not available.

All the Maternal Mortality Rates quoted in this Schedule are per 1,000 Live and Still Births.

SECTION B.

General Provisions of Health Services in the Area.

*Medical Officer of Health (part time):—Dr. A. L. Taylor, M.D., D.P.H.

*Chief Sanitary Inspector:—D. Walker, Cert. R.S.I., A.R.S.I., M.S.I.A., Certified Inspector of Meat and Other Foods.

*Additional Sanitary Inspector:—R. Thorp, Cert. R.S.I., A.R.S.I., M.S.I.A.

Clerk :—Mr. J. Bulmer.

*Half the salaries of these officers is paid by the County Council.

Some account of the Divisional administration of the Part III Health Services will be included as in previous years. Division 16, in which Stanley Urban District is included, has a population of approximately 54,000, divided between three Urban Districts. The Medical Officer of Health of Stanley is also Divisional Medical Officer and School Medical Officer for the West Riding County Council and is responsible for the day to day administration of all the County services throughout the Division. Five years' experience of the scheme confirms me in my opinion as to its great value. The Division is small enough to allow close daily and personal contacts with every type of interested authority and individual. All the Staff of the local authorities and of the Divisional organisation, are well known to me personally and discussion on every type of case takes place frequently and without delay.

The following services are administered in the area :—

Health Visiting.—The staffing position in this important branch of domiciliary nursing is showing signs of improvement. One new appointment has been made in your area and the staff now consists of three Health Visitors. The scope of their duties is constantly widening and it has now been found possible for them to undertake the visiting of Tuberculosis cases, in addition to their previous duties. The Health Visitor must possess great qualities of tact and

patience. Her work is difficult and frequently involves investigations calling for great delicacy of approach. It is pleasing to be able to record the appreciation with which their services have been met in very many instances.

Tuberculosis Visiting.—In the new field of Tuberculosis visiting, which was formerly carried out by a special Visitor, close liaison has been established with the Consultant Chest Physician at Wakefield, and any domiciliary investigation which he calls for has been carried out promptly. Patch testing with Tuberculin jelly is also undertaken at his request, and contacts are followed up to ensure a continuance of expert supervision. I feel that the work is being adequately covered and competently carried out.

School Nursing.—School nursing in your area is now carried out by three Nurses who are also Health Visitors. The idea of the same person doing both types of work is most satisfactory. The Health Visitor knows the child from birth and is familiar with its home environment. She is able to exercise a continuity of interest from birth to school leaving. She has ready access to the home and has already obtained the confidence of the parents. In addition, the teaching staff regard with increased respect the work of a person who is so obviously familiar with the medical needs of the children.

Home Nursing.—This service has continued to grow in volume and importance. The gradual ageing of the population, the increased expectation of life and the distressing shortage of institutional accommodation for the chronic sick, or aged and infirm, have all been factors in increasing the amount of work undertaken by the Home Nurses. Their work is much appreciated by their patients and the three Nurses who work in your area are enthusiastic and interested in the needs of their patients. Liaison with general practitioners is close. Domiciliary nursing is bound to increase in importance and there is no doubt that the work will grow in volume and scope.

Midwifery.—Three Domiciliary Midwives practice in your area and can call upon the services of one Relief Midwife who operates throughout the Division. Approximately 50% of all births now take place in Hospitals or

Maternity Homes. This is partly a result of difficult housing conditions, but other factors play a part. In view of the fact that no charge is made for accommodation in Institutions, and that the same maternity benefits are payable as in the case of domiciliary confinements, there is a certain financial gain to patients confined in Institutions. In addition to this there is the factor that friends and neighbours, to say nothing of relatives, seem less willing to help during the lying-in period than they were formerly. The family doctor has tended to accept responsibility for an increased number of patients electing to have their babies at home. Thus, the Midwives' work is assailed from all sides, and the ultimate result has been that the average annual number of cases undertaken has only been round about the 40 mark. This represents a serious degree of under employment and nobody is more conscious of the fact than the Midwives themselves, for whom one feels a good deal of sympathy. Each Midwife has a motor car and gives Gas and Air Analgesia where the patients desire it. Gas and Air is becoming increasingly popular with patients and removes to a great extent the dread associated in some cases with childbirth.

Home Help Service.—This is the most difficult of all the Services to administer. The very nature of the work calls for a complicated system of control. A panel of Home Helps is employed but a rigid ceiling of hours worked is laid down and cannot be exceeded. The position is under review constantly and any increase of real need will result in a revision of establishment. I am glad to be able to state that there has been a marked increase in restraint amongst those calling for home help services. In particular, the family doctors have shown an increased awareness of our difficulties and are most understanding in their attitude. Here again, the ageing of the population is raising problems. When an aged person, or persons, living alone, without near relatives, needs a Home Help, the need is likely to continue for months, or even years. Thus, an increasing proportion of available Home Help time has to be earmarked for a relatively small section of the community. Very great care has to be paid to the assessment of actual need. The home help should not be allowed to undertake "sitting-in" duties, nor may she be called upon to undertake work which falls within the scope of the Home Nursing Service. As a matter of interest, I give below the annual return of the Domestic Help Service

for 1951. This gives a very good idea of the type of case helped, and you will notice that out of a total of more than 34,000 hours given, no less than 24,000 were devoted to aged, ill or infirm.

Authorised Divisional Establishment	...	16
Number of Domestic Helps employed at 31st December, 1951:—		
(i) Whole-time	... ..	14
(ii) Part-time	... ..	14
		—
(iii) Total	... ..	28
		—

Cases provided with Domestic Help during
the year ended 31st December, 1951:—

	No. OF CASES.		HOURS EMPLOYED.	
(i) Illness (excluding aged)				
(a) Tuberculosis	3	...	652	
(b) Other	28	...	4,431	
(ii) Lying-in	60	...	4,257	
(iii) Expectant Mothers	2	...	148	
(iv) Mentally Defective	—	...	—	
(v) Aged				
(a) Illness	52	...	18,853	
(b) Infirmary	25	...	5,274	
(iv) Children of school age	6	...	941	
	176		34,556	

Number of Home Helps employed between
1st January and 31st December, 1951,
calculated on a full-time basis ... 15·1

Vaccination & Immunisation.—Immunisation against Diphtheria has been maintained at about the same level as during last year. There is some evidence that the continued absence of epidemic Diphtheria is giving rise to a feeling of complacency, and a number of parents are tending to neglect having their children protected on the assumption that Diphtheria is no longer a factor to be reckoned with. No greater fallacy could be imagined. The absence of Diphtheria is due entirely to the high level of immunity achieved by mass immunisation. If the percentage of children protected

is allowed to fall, it may well be that an outbreak of epidemic proportions may occur at any time, of sufficient severity to result in serious illness, or even death in some cases. Immunisation has been proved over many years to be absolutely safe and to give virtually complete protection. Children are immunised as a routine measure in all Welfare clinics and are given refresher doses at school entry and during school life.

Vaccination against Smallpox is still lagging very much behind. Here again, there is no sense of urgency owing to the non-existence of the disease at present. As far as one can estimate, in the Stanley area not more than 20 per cent. of infants are vaccinated. Only the occurrence of Smallpox in the community will bring home to many parents the need for protection and the dangers they allow their children to run by failing to take advantage of the immunity offered. Young children vaccinated by modern techniques suffer no inconvenience or illness whatever, and acquire protection without the large scars which were once seen. One can only hope, by constant representations, to bring about an improvement in the position.

Whooping Cough prophylaxis is at last in sight. I shall be able to tell you in my next Annual Report that protection on a large scale has been given. The new "Michigan" vaccine, which has proved so successful in America, is now becoming available in this County. Whilst one hundred per cent. protection is not claimed, all trials and tests seem to show that well over 90 per cent. of children treated acquire absolute immunity, while the remainder are only likely to develop a very modified attack of the disease. It is possible to envisage a time in the near future when Whooping Cough will become as rare in the community as Diphtheria is to-day.

CLINIC PROVISION.

As last year, Child Welfare Clinics are held at Wrenthorpe, Stanley and Outwood. The premises are the same as those formerly used and are proving reasonably adequate for their purpose. They are well attended.

Ante-Natal Clinics are held weekly at Wrenthorpe, Stanley and Outwood. The numbers in attendance are much smaller than they were before the coming into force

of the Act. This is due to a variety of causes which are well known. One can only hope that the alternative ante-natal examinations will take place in an atmosphere suitable to the educational, as well as to the clinical, needs of the patient. No small part of the function of a well-run Ante-Natal Clinic is the time and trouble taken to reassure and instruct the patient in the hygiene and psychology of child bearing. It is doubtful whether the busy general practitioner is able to spare the time needed to undertake the reassurance and instruction necessary for the wellbeing of the expectant mother. It is with some anxiety that one awaits the experience of the ensuing years in order to assess the effect of these changes on maternal morbidity.

CONSULTANT CLINICS.

These are held at the Central Clinic, Rothwell, and are as follows : -

Several Ophthalmic Clinics are usually held monthly, according to need. To these are referred all school children who are felt to be in need of specialist investigation. In addition, cases of squint or aberration of infant eyesight are examined. There is now no delay in the provision of glasses and the service runs smoothly, efficiently and without complaint. Dr. Kirkwood, the Ophthalmologist, has taken the place of Dr. Wittels, and is doing excellent work.

A monthly Consultant Paediatric Clinic is held on the second Friday in each month. Dr. J. D. Pickup has established himself as the permanent Paediatrician and his courtesy and efficiency have endeared him to all the mothers and children who come in for Consultation. It is an enormous help in integration that Dr. Pickup has children's beds in several adjacent Hospitals and also does domiciliary work in the area in addition to conducting Outpatient Clinics at his various Hospitals. A very close liaison now exists between the general practitioner, Consultant and Local Health Authority services in this field. It is impossible to stress too much the advantages deriving from such liaison. One feels that at last this important field of medical practice is being adequately covered.

In the field of Ear, Nose and Throat work, I am glad to say that by arrangement with the Regional Hospital Board, all cases from the Stanley area are referred to Mr. A. B. Hutton, Consultant Aural Surgeon at Clayton Hospital.

There is now no appreciable waiting list for treatment and a very good and close liaison exists between the three parts of the medical service.

The Orthopaedic clinic at Rothwell is still held weekly and does valuable remedial work under the care of an Orthopaedic Nurse. It has not yet been found possible to establish the hoped-for regular Consultant Orthopaedic Surgical clinic, but any individual case needing attention is readily seen at Pinderfields Hospital on special representation.

Speech Therapy clinic provision is available on one and a half days weekly, and is staffed by a full-time County Speech Therapist who works in several adjoining Divisions. The value of Speech Therapy is difficult to estimate at short term, but many cases show obvious improvement and parents express much gratification at their children's progress.

Sunray clinics are held thrice weekly, on Monday, Wednesday and Friday mornings at the Central Clinic, Rothwell, and are attended by cases from your area referred by their own family doctors, or by the Assistant County Medical Officer.

HOSPITAL PROVISION.

Infectious Disease Hospitals are, fortunately, now almost empty. Most cases from the Stanley area are admitted to Snapethorpe Hospital. A few go to Seacroft Hospital, Leeds. One advantage of the closing down of the numerous small Fever Hospitals is that all patients now enjoy very highly skilled specialist medical attention, together with the very elaborate diagnostic and treatment facilities necessitated by modern methods and technique. Here again, a very happy spirit of mutual co-operation exists and information regarding admissions, treatment and discharges is readily forthcoming.

General Hospitals.—Acute medical and surgical cases go to Hospitals in the Wakefield and Leeds areas. There is no difficulty about admissions. This is not so in the case of the chronic sick, for whom it is often almost impossible to obtain a bed. One is very frequently approached by the family doctor with a request for help in obtaining accommodation for the aged, chronic sick. Often no success is experienced in spite of approaches to many Hospitals. There is a crying need for the provision of more chronic sick beds. No doubt exists that the numbers of these cases will increase.

This is the price which must be paid for the increased expectation of life. Many cases are being nursed at home, and here the Home Nurse and Home Help Services are invaluable. At the same time, many instances are known where patients really should be in Hospital were places only available for them. Much the same state of affairs exists in relation to Welfare accommodation for the aged and infirm. Here one of the difficulties lies in diagnosis. Many patients suffering from the disabilities of old age require nursing facilities, even though their infirmity is due entirely to their advanced age. Every approach to the Welfare Department is met with promptness and courtesy. I readily accept that any failure to secure accommodation is no fault of theirs. An over-all shortage of accommodation exists and until this is remedied many sad, indeed tragic, cases must continue to arise.

AMBULANCE SERVICE.

The ambulance service has now settled down to a steady level of activity. There is some evidence of an increasing sense of responsibility on the part of the public and frivolous calls are decreasing in incidence. The Chief County Ambulance Officer, Mr. Whittaker, and his Divisional Officers, are unfailingly helpful and courteous, and willing to discuss any scheme or suggestion which is put up to them. The vehicles are well appointed and modern, and I can recall no complaint during the year from doctor or patient.

LABORATORY FACILITIES.

The Medical Research Laboratory at Wakefield, with Dr. Finlay as its Director, has given assistance in many cases during the year, and carries out any bacteriological investigation required of it. We are fortunate, indeed, in being situated so near to this valuable public service. I should like to acknowledge to Dr. Finlay his many kindnesses during 1951.

FOOD AND DRUGS.

Under the Food and Drugs Act, milk samples are submitted to the County Analyst at Bradford, as also are samples of water and foodstuffs.

SECTION C.

PREVALENCE AND CONTROL OF INFECTIOUS DISEASE.

The incidence of Infectious Disease during 1951 has been extremely slight. One notification of Diphtheria was received in relation to a child of 9 years. This was confirmed and it has been ascertained that the boy had not been immunised. Fortunately he recovered, but the fact that he contracted the disease should serve to stimulate the enthusiasm of those who tend now to regard Diphtheria as being no longer a factor worthy of consideration.

Vaccination.—As already stated, only a very small percentage of children are being vaccinated. One can only urge the necessity for this measure and emphasise its absolute safety and freedom from complications when efficiently carried out on children in early infancy.

Scarlet Fever.—Scarlet Fever continues to be a negligible factor. It will be noticed that only 13 cases were notified. Some of these were nursed at home and in the continued mildness of the disease, this is a course which is being increasingly followed, with very satisfactory results. There has been no increase in the number of cases infected. The family doctor, if he considers home conditions unsuitable, can at all times have the patient admitted to a Fever Hospital where accommodation is always available.

Whooping Cough.—Whooping Cough was notified in 29 instances. No death occurred from the disease. Nevertheless, this illness can be extremely serious, particularly to young infants. Thus it is pleasing to be able to record that at long last vaccination against Whooping Cough is to be made available at all Welfare Clinics. The new "Michigan" vaccine, which long controlled trials have proved to be the most effective means of protection, is shortly to be made available and will be used. It is some indication of the awareness of mothers that they have pressed, for some considerable time, for this form of inoculation. The insistence thus placed on Whooping Cough prophylaxis indicates that when a disease is prevalent protection is eagerly sought for. In the case of Diphtheria and Smallpox, which have now been eliminated, a certain amount of apathy has crept in.

Acute Anterior Poliomyelitis.—It is with satisfaction that I state that no notification of Infantile Paralysis was received during the year. Research into this disease is still being actively carried on and one hopes for some means of protection in the ultimate future.

Measles.—102 Measles notifications were received, and there was no death from the disease.

Pneumonia.—16 notifications of Pneumonia were received and 7 deaths were recorded. Pneumonia is particularly dangerous at the extremes of life and is often a terminal condition in elderly or infirm patients. In the case of two infantile deaths associated with broncho-pneumonia, additional congenital defects were present in both cases, and the survival of the children in any case was a very doubtful possibility.

Food Poisoning.—No case of Food Poisoning was notified in the District during 1951.

Tuberculosis.—As I stated in my opening remarks, the incidence of new cases during 1951 is the lowest ever recorded. This state of affairs is additionally satisfactory when one realises the intensification of the measures taken to secure early diagnosis. Mass radiography and the routine X-ray of the chests of applicants for many types of employment, tend to bring to light earlier cases of the disease which have, up to then, given rise to no symptoms. On the curative side, there is some evidence that Sanatorium admission is becoming a little easier. Delays are less lengthy and cases of absolute need can now secure almost immediate admission. Dr. Stevenson, the Consultant Chest Physician at Wakefield, to whom cases arising in your District are referred, takes a very active interest in the welfare of his patients, and has always been most helpful and co-operative. On the Local Authority's side, I am glad to say that the Stanley Council has always given the most sympathetic consideration to requests for re-housing tubercular families, and almost all those for whom special consideration has been requested, have been re-housed within a comparatively short time. New methods of treatment and the introduction of new and potent drugs, are hoped to improve still further the outlook regarding Tuberculosis. B.C.G. vaccination still continues, although it is yet too early accurately to assess its value as a means of prevention. The over-all picture is one which gives rise to considerable optimism. The greatest

difficulty is, of course, that tuberculosis is an infectious disease, usually running a long course. Unless the patient can be segregated, it is inevitable that he will disseminate infectious material and that his contacts will tend to run a considerable risk of succumbing. One of the most cheerful factors is the new attitude towards tuberculosis which is apparent in the community. There is no longer the same atmosphere of shame and feeling of guilt which apparently afflicted those unfortunate households of whom a member was suffering from T.B. People are becoming increasingly aware that every member of a civilised community has, at some time or other, been infected with all the pervading germ of tuberculosis. Those who fall victims are unfortunate in fact, and must in no way be regarded as being responsible.

Venereal Diseases.—Incidence of Venereal Disease continues negligible and very few cases are coming to the notice of the Consultant Physician concerned with the treatment of this disease.

Enteric.—One case of Paratyphoid fever occurred. This was in the case of a man who was removed to Hospital with abdominal pain, and was only diagnosed as suffering Paratyphoid B some considerable time after his admission. He made an uneventful recovery but the fact that his occupation was that of Cook at a large hostel, made one realise that we were perhaps fortunate in having escaped a major outbreak. Rigorous and prolonged tests were made by Dr. Findlay and the staff of the Medical Research Laboratory at my request. The man was found to be clear of all infection and has been allowed to resume his occupation.

Puerperal Pyrexia.—No notification of Puerperal Pyrexia was received, and this fact is a great tribute to the high standard of aseptic care used by doctors and midwives during the confinement and puerperium of their patients.

Infestations.—Scabies was reported in the case of one family of the "problem" type. This was treated with Benzyl Benzoate and ultimately cleared up after some difficulty. Scabies has now almost disappeared from the community and the widespread incidence experienced during the war-time years is fortunately no longer with us.

Pediculosis was not a factor to be reckoned with and only a few children were found to have nits or vermin during school medical inspections. All these were cleared up satisfactorily by the use of one of the new drugs available through the school medical service.

Statement of Notifications of Infectious Diseases received during 1951,
Stanley Urban District.
and Cases removed to Hospital.

Cases Notified.		Cases removed to Hospital.	
Scarlet Fever.	13	Smallpox.	6
Whooping Cough.	29	Diphtheria.	1
		Measles (excluding Rubella).	102
		Acute Pneumonia.	16
		Meningococcal Infection.	..
		Acute Poliomyelitis.	..
		Acute Encephalitis.	..
		Dysentery.	1
		Ophthalmia Neonatorum.	..
		Puerperal Pyrexia.	..
		Smallpox.	1
		Paratyphoid Fevers	..
		Enteric or Typhoid Fever.	..
		Food Poisoning, excluding Dysentery.	2
		Erysipelas.	..
		Malaria	..
		Scarlet Fever.	9
		Diphtheria.	1
		Enteric Fever.	..
		Acute Poliomyelitis	..
		Acute Polioencephalitis	..
		Cerebro-Spinal Fever	..

Cases of Notified Infectious Diseases in Age Groups (excluding Tuberculosis)

Disease.	Under 1 yr.	1-3 yrs.	3-5 yrs.	5-10 yrs.	10-15 yrs.	15-25 yrs.	25-45 yrs.	45-65 yrs.	Over 65 yrs.	Total.
Smallpox ..	M .. F ..	..	..	..	..	..	..	..	..	..
Scarlet Fever ..	M .. F 1	2 1	3 3	2 1 1	..	..	..	..	..	7 6 1
Diphtheria ..	M .. F ..	..	..	..	..	..	..	..	..	..
Enteric (including Paratyphoid)	M .. F ..	..	..	..	..	1	..	..	..	1
Pneumonia ..	M .. F ..	..	..	..	1	..	2	1	2	6 10
Puerperal Pyrexia ..	M .. F ..	..	..	..	..	..	..	..	..	..
Acute Anterior Poliomyelitis	M .. F ..	..	..	..	..	..	..	..	..	..
Acute Anterior Encephalitis	M .. F ..	..	..	..	..	..	..	..	..	..
Meningococcal infection	M .. F ..	..	..	..	..	..	..	..	..	..
Ophthalmia Neonatorum	M 1 F ..	..	..	..	..	..	..	..	..	1
Erysipelas ..	M .. F ..	..	..	..	..	..	..	1	1	..
Whooping Cough	M 3 F ..	4 5	3 4	6 4 2	..	..	..	..	..	16 13 44 58
Measles ..	M 4 F 5	27 38	11 13	2	..	..	..	..	..	..
Totals ..	M 8 F 6	33 44	17 20	11 7	1 ..	1 ..	2 6	2 3	2 2	77 88

TUBERCULOSIS.

Record of Cases during 1951.

	Pulmonary		Non-Pulmonary	
	M	F	M	F
No. of cases on Register at beginning of year	31	26	10	4
No. of cases notified for first time during year	4	4	—	—
No. of cases added to Register otherwise than by notification ...	1	1	—	—
No. removed to other districts ...	—	1	—	—
No. Cured	—	—	—	—
No. died from Disease	—	1	—	—
No. died from other causes ...	—	—	—	—
No. Removed from Register :— Revised diagnosis	—	—	—	—
No. of cases on Register at end of year ...	36	29	10	4

Tuberculosis. New Cases and Mortality during 1951.

Age Periods		New Cases				Deaths			
		Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
		M	F	M	F	M	F	M	F
0—1 year ...	...	—	—	—	—	—	—	—	—
1—5 years ...	...	—	—	—	—	—	—	—	—
5—10 „ ...	...	—	—	—	—	—	—	—	—
10—15 „ ...	...	—	—	—	—	—	—	—	—
15—20 „ ...	...	—	1	—	—	—	—	—	—
20—25 „ ...	...	1	—	—	—	—	—	—	—
25—35 „ ...	...	—	2	—	—	—	—	—	—
35—45 „ ...	...	—	1	—	—	—	—	—	—
45—55 „ ...	...	1	—	—	—	—	1	—	—
55—65 „ ...	...	2	—	—	—	—	—	—	—
over 65 years ...	...	—	—	—	—	—	—	—	—
Age unknown ...	...	—	—	—	—	—	—	—	—
Totals ...	...	4	4	—	—	—	1	—	—

Tuberculosis (New Cases) since 1931.

Year			New Cases		Deaths	
			Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary
1931	...	...	28	5	16	3
1932	...	...	17	14	9	4
1933	...	...	17	1	8	1
1934	...	...	10	3	6	—
1935	...	...	11	7	8	1
1936	...	...	6	6	6	3
1937	...	...	13	7	5	2
1938	...	...	9	2	8	—
1939	...	...	17	7	5	2
1940	...	...	10	6	7	1
1941	...	...	10	5	7	2
1942	...	...	18	4	10	12
1943	...	...	21	3	9	—
1944	...	...	7	3	5	1
1945	...	...	10	7	2	2
1946	...	...	9	8	5	1
1947	...	...	12	2	4	1
1948	...	...	8	3	4	1
1949	...	...	17	4	4	—
1950	...	...	11	6	2	1
1951	...	...	8	—	1	—

SECTION D.

Water.—The water supply is derived from the same source as formerly, and is adequate in amount and satisfactory in quality. Two samples were taken during the year and the results are tabulated below.

Parts per million.			
Total Solids	...	115	120·4
Mineral Matter	...	88	92·0
Chlorides as NaCl.	...	23	26
Free Ammonia	...	0·016	0·006
Albuminoid Ammonia	...	0·036	0·030
Oxygen absorbed in 4 hrs.			
at 80°F.	...	0·21	0·23
Nitrous Nitrogen	...	—	—
Nitric Nitrogen	...	0·30	0·45
Temporary Hardness	...	16	18
Total Hardness	...	54	52
Permanent Hardness	...	38	34
Alkalinity in terms of			
CaCO ₃ to M.O.		16	18
Acidity in terms of CaO		nil	nil
Lead in solution	...	nil	nil
Lead dissolved in 24 hours		nil	nil
pH. Value	... ..	6·9	6·9
Appearance	... ..	Clear and	Clear and
		colourless	colourless
Free Chlorine	... ..	0·04	0·07

Sewage Works.—The alterations and improvements to the Sewage Works which were mentioned last year have not yet been carried out. The financial and material stringencies of the times inevitably delay improvements such as these, greatly though this is to be deplored. Nevertheless, one feels that other and more urgent tasks demand priority. At the same time, the work will have to be done sooner or later, and the Works cannot be considered satisfactory by modern standards.

Drains and Sewers.—There have been no major developments during the year. In contrast with some other mining areas, Stanley has been fortunate in that its sewers have not been damaged or disturbed by mining subsidence.

Closet Accommodation.—12 privies were converted to W.C.'s during the year and the following table shows the continued improvement in comparison with 1926.

<i>Year</i>	<i>No. of Privies</i>	<i>No. of W.C.'s</i>	<i>No. of Waste W.C.'s</i>
1926	1,092	1,387	12
1951	95	4,735	12

Public Cleansing.—The cleansing of the District is done by direct labour and the Service has been adequately maintained. The mechanical gully emptier is employed for the emptying of cesspools and this is done without nuisance. There are 15 cesspools in the district and these are emptied monthly.

SANITARY INSPECTION OF AREA.

Infectious Disease Prevention.

Inspections	...	...	...	...	15
Further Enquiries	...	...	...	...	4
Disinfections	...	...	...	...	11
Schools Disinfected	...	...	...	...	—
Miscellaneous Visits	...	...	...	...	—
Scabies Visits	...	...	...	...	—
					— 30

Milk and Dairies.

Inspections of Cowsheds and Dairies	...	...	...	...	—
Milk Samples taken	...	...	...	...	45
					— 45

Food and Drugs Inspections.

Meat Inspections	...	...	...	...	459
Bakehouses	...	...	...	...	11
Food Inspections...	...	...	...	...	119
Ice Cream Sampling	...	...	...	...	—
Water Sampling...	...	...	...	...	2
Fish Shop Inspection	...	...	...	...	23
					— 614

Housing.

Houses inspected and recorded	...	...	...	...	284
General Surveys	...	...	...	...	238
Public Health Act Inspections	...	...	...	...	266
Re-visits	...	...	...	...	264
					— 1052

Offensive Trades.

Inspections of Knackers' Yards	...	7
Inspections of Blood Boiling premises		—
Inspections of Fat Refining Premises		—
		— 7

Sanitary Matters.

Inspections of Petroleum Tanks	...	5
Inspections for Nuisances	... ..	570
Inspection of Verminous Premises	...	27
Inspections for Rat infestations	...	747
Inspections of new Drains	... ..	17
Smoke observations	... ..	52
Visits re Privy conversions	... ..	101
		— 1569
Inspections re Refuse Removal and Disposal	... ..	279
Factories and Workshops	... ..	86
Tents, Vans and Sheds	... ..	62
Number of Statutory Notices (Housing Act and Public Health Acts)	... ..	8
Number of Statutory Notices (Sect. 17 of the Housing Act, 1936)	... ..	—
Number of Nuisances abated on serving Statutory Notice (Public Health Acts)		8
Council House Inspections	... ..	66
Inspection of repairs	... ..	66
Miscellaneous	... ..	256
Visits re Council House applications	...	444

Shops Act.—No complaint or action has been necessary in respect of any of the shops in the area.

Camping Sites.—There are no official camping sites in the area.

Smoke Abatement.—Apart from the general smokiness inevitable in a District such as yours, there have been two major factors during the year. One is our old friend Lofthouse Colliery, whose filthy emanations can be seen from many miles away, and constitute a major nuisance in the area. Many approaches have been made, and whilst all of these have been courteously received, one feels that the control of the nuisance is outside the powers of those having local responsibility. The long awaited electrification of the Colliery is said to be proceeding, but, in the meantime, the smoke nuisance continues unabated and one despairs of finding a solution.

On a smaller scale, a nuisance has arisen during the year from the Miners' Hostel at the top of Stanley Hill. Complaints from local residents led to investigation, and there was no doubt that a nuisance was arising. Approaches to the Hostel itself and subsequently to the Ministry of Works, resulted in a temporary improvement, but from time to time there are periods during which very serious atmospheric pollution is caused, together with discomfort to local residents. The matter is being closely watched and all possible steps will be taken.

Colliery Spoil Heaps.—It is pleasing to note that in this connection the National Coal Board and its officials have been most helpful and co-operative. Sprays are constantly in action on the tips and fires have been kept down to minimum.

Eradication of Bed Bugs.—12 houses were reported as being verminous. All were sprayed with D.D.T. liquid, with excellent results. 20 cases of beetle infestation were dealt with, again by the use of Vermicine and Gammexane dust.

Offensive Trades.—No offensive Trade is carried on in the District apart from one Knacker's Yard. In addition, a small gut scraping room at the Farm Stores is in operation. This is carefully controlled and, indeed, the Senior Sanitary Inspector spends the better part of three days a week on the premises, during the course of his routine meat inspections.

23 visits have been paid to the 26 fried fish shops in the area. Cleanliness has been maintained at a high level and the owners are obviously interested in keeping their premises as hygienic as possible. In almost every shop—the exceptions being those adjoining houses—a constant supply of hot water is available.

Inspection for purposes of provisions as to health.

(including inspections made by Sanitary Inspector).

Premises	No. on Register	Number of		
		Inspections	Written Notices	Occupiers prosecuted
1. Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	22	21	—	—
2. Factories not included in (1) in which Section 7 is enforced by the Local Authority	31	65	—	—
3. Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises) ..	—	—	—	—
TOTAL	53	86	—	—

Cases in which DEFECTS were found. (If defects are discovered on two, three or more separate occasions they should be reckoned as two, three or more cases).

				No. of cases in which defects were found				Number of cases in which Prosecutions were instituted
				Found	Remedied	Referred		
						to H.M. Inspector	by H.M. Inspector	
Want of cleanliness	..	..	---	---	---	---	---
Overcrowding	..	..	---	---	---	---	---
Unreasonable temperature	..	..	---	---	---	---	---
Inadequate ventilation	..	..	---	---	---	---	---
Ineffective drainage of floors		..	---	---	---	---	---	
Sanitary Conveniences :—								
Insufficient	..	..	---	---	---	---	---
Not separate for sexes	..	..	---	---	---	---	---
Unsuitable or defective	..	..	6	6	---	---	---
Other offences against the Act (not including offences relating to Outwork)		..	---	---	---	---	---	
Total	..	..	6	6	---	---	---

Outwork.

Nature of Work	Section 110				Section 111	
	No. of out workers in August list required by Sec. 110 (1)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in un-wholesome premises	Notices Served	Prosecutions
WEARING APPAREL :—						
Making, etc. ..	3	—	—	—	—	—
Cleaning and washing	—	—	—	—	—	—
Textile Weaving ..	—	—	—	—	—	—
TOTAL ..	3	—	—	—	—	—

SECTION E.

HOUSING STATISTICS.

1. Inspection of Dwelling Houses during the year.

1a.	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	550
b.	Number of Inspections made for the purpose ...	1052
2a.	Number of dwelling houses (included under sub-head 1 above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1942	284
b.	Number of Inspections made for the purpose ...	522
3.	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	284
4.	Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	-

2. Remedy of Defects during the year without the service of Formal Notice.

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	383
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3. Action under Statutory Powers during the year.

a.—Proceedings under section 9, 10 and 16 of the Housing Act, 1936 :—

(1) Number of dwelling-houses in respect of which notices were served requiring repair	-
(2) Number of dwelling houses which were rendered fit after service of formal notices :	
(a) By owners	-
(b) By Local Authority in default of owners	-

b.—Proceedings under the Public Health Act, 1936 :—

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	8
---	---

(2) Number of dwelling-houses in which defects were remedied after the service of formal notices :—

(a) By owners	...	...	...	...	5
(b) By Local Authority in default of owners	...	...	...	...	2

c.—Proceedings under Sections 11 and 13 of the Housing Act, 1936 :—

1. Number of representations etc. made in respect of dwelling-houses unfit for human habitation	...	...	...	...	6
2. Number of dwelling-houses in respect of which Demolition Orders were made	...	...	...	...	6
3. Number of dwelling-houses demolished in pursuance of Demolition Orders	...	...	...	...	—
4. Number of dwelling-houses in respect of which undertakings were accepted from owners :					
a. To render houses fit for human habitation	...	...	...	...	—
b. As to usage other than for human habitation	...	...	...	...	—

d.—Proceedings under Section 12 of the Housing Act, 1936 :—

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	...	...	...	...	—
(2) Number of separate tenements or underground rooms closed in pursuance of Closing Orders	...	...	...	...	—
(3) Number of separate tenements or underground rooms, the Closing Orders in respect of which were determined, the tenement or room having been rendered fit	...	...	...	...	—

4. Number of New Houses erected during 1951 :

a. By Local Authority	...	...	...	...	42
b. By Private Enterprise	...	...	...	...	—

5. Overcrowding.

a. Number of dwelling-houses overcrowded at the end of the year	...	...	...	...	56
b. Number of families dwelling therein	...	...	...	...	137

c.	Number of persons dwelling therein	...	...	307
d.	Number of new cases of overcrowding reported during the year	...	...	5
e.	(i) Number of cases of overcrowding relieved during the year	...	...	14
	(ii) Number of persons concerned in such cases			76
f.	Particulars of any cases in which dwellinghouses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding	...	...	—
g.	Any other particulars with respect to overcrowding conditions upon which the Medical Officer of Health may consider it desirable to report	...	...	—

The ascertainment of overcrowding remains an unpractical procedure. Overcrowding undoubtedly does exist to a moderate degree. The new and higher standards expected lead one to feel that overcrowding standards as defined in the Housing Act, 1936, are no longer socially acceptable. There is no doubt that “social” overcrowding exists to a considerable degree and that much unhappiness is being caused therefrom. The provision of new housing accommodation and the preservation of the old, remain priority Number 1 in the programme of social welfare.

284 Houses were inspected and recorded with a view to action under the Housing Act as soon as it is possible to re-house the occupants.

All other defects were dealt with under the Public Health Act, 1936, thus conforming to the procedure adopted in previous years.

6 Houses were represented to the Council under Section 11 as being unsuitable for human habitation and incapable of being rendered suitable at reasonable cost.

Since commencing housing operations on a large scale in 1935, the following clearance areas and individual unfit houses have been dealt with :—

Clearance Areas :—

Number of Clearance Areas declared	...	48
Number of houses therein	...	279
Number of persons involved	...	994
Number of Clearance Orders confirmed	...	48

Individual unfit houses :—

Number of houses represented	...	...	139
Number of Demolition Orders	...	...	98
Number of Closing Orders ...	...	...	14
Number of undertakings to repair	...	...	22

During 1951, the Council completed 42 permanent houses. No privately built house was completed. Since the war, 40 temporary prefabricated bungalows have been built and occupied and 41 houses have been built by private enterprise. The total number of houses built since the war to the end of 1951 is 379, consisting of:

- (1) 259 permanent brick houses.
- (2) 38 permanent prefabricated bungalows.
- (3) 40 temporary prefabricated bungalows.

SECTION F.

Inspection and Supervision of Food.

Milk Supply.—45 Official samples of milk were taken from retailers and submitted to the Public Analyst. Of these, 40 were genuine, 4 were deficient in non-fatty solids and one was deficient in fat. The last-named had a fat content of $1.51\frac{2}{10}$, that is to say, $50.4\frac{3}{10}\%$ of the required quantity. The milk from which this sample was taken was produced outside the Stanley Urban District, and the matter was passed to the County Council. After further tests it is understood that the milk was considered not to be adulterated.

Ice Cream.—Practically all ice cream sold from registered premises in the District is pre-packed and thus free from the risk of handling contamination. No case of illness as a result of the consumption of ice cream has been reported during the year. All premises registered for the sale of Ice Cream have been subjected to regular inspection and the standards of hygiene and cleanliness laid down are being carefully adhered to.

Meat and Food Inspection.—The Farm Stores have again slaughtered a very considerable number of pigs during the year. A Meat Inspector from the Sanitary Inspector's Department attends three afternoons weekly. The stores are modern in construction and are run on cleanly and hygienic lines. The proprietors are co-operative and readily accept any suggestion for the improved running of their business. The tables showing meat and food inspected and condemned are set out in the Sanitary Inspector's Report.

Shell Fish.—There are no shell-fish layings in this district.

Stanley Urban District Council.

ANNUAL REPORT

OF THE

Sanitary Inspector and Cleansing Superintendent

(D. WALKER, A.R.S.I., M.S.I.A.)

For the Year 1951.

To the Chairman and Members of the Stanley Urban District Council,

GENTLEMEN,

I beg to submit this, my Second Annual Report, upon the work done by your Health Department during the year.

Many of the records of inspections and statistical data are to be found in the earlier part of the report. Housing repair work to cottage property still continues to suffer owing to the great increase in costs and to the small amount of work which could be carried out during the war years. Many houses which it is known should be condemned, continue to house families.

The problem, however, is a national one and not confined to this district.

In addition to damage to houses by wear and tear, mining subsidence continues to cause worse damage and in three cases has been the cause of houses having to be closed.

It may be said however, that the Coal Mining Subsidence Act, 1950 has simplified matters regarding the repair of houses affected by subsidence and the Coal Board, through their officials, have I think, tried their best, within the powers granted by the Act to alleviate inconvenience to tenants living in houses which have been thus affected. The two areas chiefly concerned are Lofthouse Gate and Bottomboat.

During the year the Council decided to supply dustbins to premises requiring renewals and to charge the cost of this service on the general rate. In view of the many varied court decisions on this matter I feel that this is the best way to deal with it, as after all the good dustbin is the key to the efficient and safe public cleansing service.

The meat inspection table shews the considerable attention which has been paid to this particular subject.

I should like to express my appreciation to the Chairman and to the Council for the encouragement and consideration they have given me during the past twelve months.

Abatement of Nuisances.

Number of Privies converted into W.C.'s	...	12
Do. W.C.'s provided	...	12
Do. Choked drains and W.C.'s cleared	...	176
Do. Choked sewers cleared	...	—
Do. Sink wastes repaired	...	10
Do. Defective drains relaid	...	8
Do. New drains laid...	...	17
Do. Gully traps fixed	...	—
Do. Water closets repaired	...	30
Do. Inspection chambers repaired	...	—
Do. Eaves gutters/down spouts repaired		75
Do. House roofs and damp walls repaired		117
Do. Flooded cellars	...	5
Do. Damp houses remedied	...	117
Do. Damp proof courses fixed	...	—
Do. House floors repaired	...	13
Do. Walls replastered	...	97
Do. New sinks fixed	...	7
Do. Windows re-corded and repaired	...	66
Do. Fireplaces repaired	...	33

Number of Washing coppers repaired	...	6
Do. Defective dustbins removed	...	226
Do. Privy middens abolished	...	12
Do. Ashpits abolished	...	12
Do. Dustbins provided in lieu of ashpits	...	12
Do. Verminous premises	...	32
Do. Dirty premises	...	—
Do. Beetle infested premises	...	20
Do. Rat infested premises	...	178
Do. Burst services	...	—
Do. Ashpits repaired	...	—
Do. W.C. Soil pipes repaired	...	30
Do. Ceilings repaired	...	—
Do. Doors repaired/renewed	...	20
Do. Bath wastes repaired	...	—
Do. Miscellaneous cleansing	...	—
Do. Cooking ranges repaired	...	33
Do. Defective chimneys	...	8
Do. Insanitary yards	...	2
Do. Accumulations of refuse	...	2
Do. Dangerous buildings	...	1
Do. Insufficient W.C. accommodation	...	6
Do. Dangerous walls	...	1

Meat Inspection.

Slaughtering at the Farm Stores Bacon Factory has continued and the rate of killing stepped up somewhat. Regular inspections are made and all carcasses and offal are inspected prior to despatch to various parts of the County. The factory is built on modern continuous line fashion and leaves little to be desired from the public health point of view. The proprietors, through the manager, are most co-operative and willing to carry out most of the suggestions made by your inspector.

Regular inspections are made to the Meat Allocation Depot of the Stanley area which is situated at Lofthouse Gate. Whilst every effort is made to keep the meat as clean and wholesome as possible the system leaves much to be desired.

From the table shown it will be seen that the percentage of the whole carcasses condemned was only 0·24% and that the percentage which had some part condemned for tuberculosis only 4·9%.

Condemnation of Meat.

35 carcasses and organs...	5177 lbs....	Gen. Tuberculosis
3 carcasses and organs...	340 lbs....	Dropsy
1 carcase and organs ...	92 lbs....	Jaundice
1 carcase and organs ...	78 lbs....	Gangrene and Tuberculosis
1 carcase and organs ...	190 lbs....	Moribund
1 carcase and organs ...	180 lbs....	Swine Erysipelas
Pigs heads	... 407	...Tuberculosis
Pigs livers	... 2	...Tuberculosis
Pigs livers	... 22	...Necrosis
Pigs livers	... 22	...Cirrhosis
Pigs livers	... 5	...Echinococcus Cysts
Pigs livers	... 1	.. Peritonitis
Pigs livers	... 4	...Hepatitis
Pigs lungs (sets of)	... 518	...Pneumonia
Pigs lungs (sets of)	... 105	..Pleurisy
Pigs lungs (sets of)	... 8	...Pneumonia & Pleurisy
Pigs plucks	... 244	...Tuberculosis
Pigs plucks	... 2	...Echinococcus Cysts
Pigs plucks	... 3	...Necrosis and Inflammation
Pigs plucks	... 45	...Pleurisy, Pneumonia & Peritonitis
Pigs pluck	... 1	...Chronic Pneumonia & Hepatitis
Pigs plucks	... 3	...Abscesses
Pigs mesenteric fats	... 197	...Tuberculosis
Pigs hearts	... 217	...Pericarditis
Pigs hearts	... 3	...Endocarditis
Pigs kidneys	... 65	...Cystic
Pigs kidneys	... 28	...Nephritis
Pigs kidneys	... 2	...Carcinoma
Pigs kidneys	... 10	...Tuberculosis
Pigs kidneys	... 2	...Peritonitis
Pigs stomachs	... 17	...Tuberculosis
Pigs stomachs	... 1	...Decomposition
Pigs kidneys & flair fats	6	...Tuberculosis
Pigs hocks	... 2	...Rheumatism
Pigs vertebrae	... 6	...Tuberculosis
Pigs forequarters, 44 lbs.	2	...Tuberculosis
1 pigs forequarter ribbed out for chronic pleurisy and abscesses		
1 pigs forequarter ribbed out for pleurisy		
9 pigs skinned for urticaria		

Pork	...	7 lbs....	Tuberculosis
Pigs udder	...	11 lbs....	Mastitis
Beasts liver	...	10 lbs....	Tuberculosis
Beef	...	10 lbs....	Blood soaked
Beef skirt	...	48 lbs....	Mice contamination
Mutton	...	24 lbs....	Sour

Meat and Foods.

During the year there was one prosecution of a local butcher for having in his possession for sale, meat which was unfit for human consumption, i.e., 1 bull carcase affected with generalised tuberculosis. The prosecution was taken along with one by the Ministry of Food for illicit slaughter of the bull.

The magistrates fined the butcher £5 and costs in respect of the prosecution by this authority. The carcase was destroyed.

Carcases Inspected and Condemned.

	Cattle excluding cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed (if known) ..	—	—	—	—	14349
Number Inspected ..	—	—	—	—	14349
<i>All Diseases except Tuberculosis :—</i>					
Whole carcases condemned	—	—	—	—	7
Carcases of which some part or organ was condemned	—	—	—	—	1059
Percentage of the number inspected affected with disease other than tuber- culosis ..	—	—	—	—	7.4
<i>Tuberculosis Only :—</i>					
Whole carcases condemned	—	—	—	—	35
Carcases of which some part or organ was condemned	—	—	—	—	675
Percentage of the number inspected affected with tuberculosis ..	—	—	—	—	4.9

Milk and other Foods.

45 official samples of milk were taken from retailers in the district and submitted to the Public Analyst for his analysis. Of these samples 1 was found to be deficient in fat to the extent of 49·6°/°. Appeal to the cow samples taken by the W.R.C.C. as the Food and Drugs Authority for the district from which the milk came revealed that the producer bottled the milk from each cow separately and that there was in fact a cow giving milk with a deficiency of fat as high as 54·8°/°. In view of this evidence no legal action was taken on this seemingly open case.

4 samples of milk were found to be deficient in milk solids other than fat but in each case the freezing point test showed them to be genuine.

119 visits have been made for the purpose of inspecting food shops and it was found necessary to condemn the following:—

Tomato paste	...	15 tins	Blown
Cheese	...	52 $\frac{3}{4}$ lbs.	Rancid
Biscuits—macaroon	...	560 lbs.	Rancid and musty
Jellied Veal	...	6 lbs.	Tin perforated
Boneless cooked ham	...	390 lbs. 11 oz.	Decomposition
Boneless cooked ham	...	103 lbs. 15 oz.	Blown

During 1950 the Council adopted bye-laws relating to the handling, wrapping, and delivery, etc. of food and these have been implemented where necessary.

Bakehouses.

11 inspections of the bakehouses of the district were carried out and nothing to complain of was found. There are 8 bakehouses in the district.

Offensive Trades.

No offensive trade is carried on in the district. Fat melting and extracting is carried on on a small scale at the Bacon Factory as is gut scraping but hardly on such a scale as to class as a trade. The Knackers Yard at Kirkhamgate is in good structural condition and the owners keep the place in a satisfactory clean condition.

Fish and Chip Shops.

Although no longer an offensive trade these shops are visited regularly. During the year 23 visits have been made and it can be said that generally speaking there is a good class of shop in this area. There are 26 shops registered in the area.

Factories and Workshops.

86 visits were made to factories and workshops of the district and generally speaking the premises were found to be satisfactory. No notice was received from H.M. Inspector of Factories in respect to any default found by his department.

The number of premises on the register at the end of the year was 31 with mechanical power, and 22 without mechanical power.

Smoke Abatement.

Colliery chimneys in this and neighbouring districts continue to pour out black smoke for periods well in excess of 3 minutes in 30. Constant touch is maintained with the colliery officials respecting the matter but until various proposed electrification schemes are completed I am afraid that there will be no material improvement in the position.

Joint action has been proposed early in 1952 by Ossett, Wakefield and Stanley authorities respecting Roundwood Colliery chimney and it is hoped that some good will come of this action.

The Miners' Hostel at Stanley is the only other chimney in the area which gives any trouble and this is owing to the fact that the chimney is much too low having regard to the surrounding buildings. Use of poor quality fuel has not helped in this matter either and several complaints have been made to the responsible government department. Here again it is hoped that 1952 will show some improvement in the position.

During the year 52 observations have been taken of various chimneys and 10 gave readings of smoke emission for periods in excess of three minutes in thirty.

Colliery Tips.

The large tip at Lofthouse has been abandoned during the year and the small one to the North side of Lingwell Nook Lane has been enlarged. The N.C.B. maintain a good system of sprays on both these tips and nuisance from fumes is reduced to a minimum.

Housing.

A considerable amount of time has again been paid to general housing inspection and all complaints from tenants have received early attention. A good deal of repair work has been carried out on notices and letters from the department but there are a large number of houses which can only be dealt with by condemnation.

6 houses have been dealt with under Section 11 of the Housing Act, 1936 but this is only touching on the fringe of the problem.

Even with all these old houses still being used there is a shortage of houses in the district as shown by the Council house application list which shews some 333 applicants who are in lodgings and have no home of their own.

No use has been made by owners of the improvement schemes which have been made available by the Housing Act, 1949 but it is possible that in years to come when the housing standard of older property is raised there will be a good number of owners desirous of taking advantage of this Act.

Overcrowding.

Figures of families overcrowded are not actually available but houses known to be housing more than the legally permitted number of persons at the end of the year numbered 27.

I am sure that the moral overcrowding of houses is greatly in excess of this figure as the permitted numbers for the various types of houses appear too high. It will be seen from the previous table that 14 cases of overcrowding were relieved during the year by the allocation of Council houses.

Privy Conversions.

The gradual replacement of privies in the area has continued during the past year and 12 have been converted to W.C.'s during this time.

In addition to conveniences in use as shown in the table there are 14 pail closets.

No. and Type of Closet			No. and Type of Ashpits				Cess-pools emptied by Sanitary Staff
Privies to convert in all parts of the District	Water Carriage System						
	Fresh Water	Waste Water or Hand Flushed	Total No. of Ashpits of all kinds	Privy Ashpits	Dry Ashpits	Bins	
95	4,735	12	4,870	53	12	4,805	15

When the programme of privy conversions is completed I hope that the time will be opportune to proceed with the paving of yards and passages which I think is a most important factor in public health.

Cesspools.

The 15 cesspools and all the road gullies in the district are cleansed regularly by means of the Council's own 750 gallon mechanical gully and cesspool emptier. The work is carried out satisfactorily and hygienically and by loaning out the machine to the West Riding County Council, Horbury and Ossett the service is provided very economically.

Water Supply.

All occupied premises in the district are on town's water supply which is bought from Wakefield Corporation. Certain parts of Ferry Lane and Brandy Carr suffer from low pressure and consequent poor supply at various parts of the day. Sooner or later it appears that renewal of these mains will have to be carried out.

The results of clinical examinations of samples of water taken appear in an earlier part of the report.

Tents and Caravans.

There are only two licensed caravans in the area. One of the public houses utilises a field at the rear for a site for the travelling salesmen at various times of the year. The use of this site is limited to four families at any one time and proper water supply and sanitary accommodation are provided. The site is not licensed.

The site has been used in this way for a number of years.

It is felt that with the continuation of the housing shortage, applications for the use of sites for individual caravans will be received and will have to be dealt with in the future.

Disinfection.

The Disinfection of infected premises is done by means of formalin lamps and spray.

Number of Disinfections 11

Verminous Premises.

Liquid insecticide has again been the only material used at premises found infested with bugs, fleas, etc., and has given very good results.

Gammexene dust has been used with success against cockroaches. Periodic spraying of the tip infested by crickets has kept this nuisance to a minimum. Fortunately the tip in question is sited well away from all houses.

Rodent control has again been carried out during the year by the Council's part-time operator. There are no places in the district which show major infestation.

The sewage works and refuse tips are treated regularly and the sewers have had the yearly 10 per cent. test bait.

Cleansing and Salvage.

This service is carried out by direct labour. Under normal circumstances bins are being emptied at intervals of seven days and privies at intervals of fourteen days.

A new Karrier Bantam 7 cu. yd. type vehicle has been purchased and an old Bedford 30 cwt. type lorry disposed of. Three lorries are now engaged full time on refuse collection and a fourth is used for salvage work and part-time refuse collection.

The garage arrangements have been altered at Outwood Hall to allow the repair of vehicles to be carried out under much better conditions than has applied previously.

Salvage has again shown itself to be an essential and important part of the department from the economic point of view. Paper, rags and non-ferrous materials continue to realize greatly increased prices and the total income from these items for the year was £1760, which was made up as follows: Paper £1,467. Metal and Rags £225. Kitchen Waste £68.

The quantity of waste paper and rags collected was increased greatly during the year by the implementation by the Council of a bonus scheme. This provided for the payment of half the income from all waste paper collected over the previous monthly average of five tons, and a proportion of the income from increased rag collection. During the year £300 was paid out as bonus to the workmen.

A loss is still being made on the collection of kitchen waste which I think could be easier and more regularly collected by arrangement with the many pig keepers in the district.

An application to the Ministry along these lines failed to have the order requiring the Local Authority to collect, removed.

The labour difficulty appears to have eased during this year and the winter has been a good one from the point of view of cleansing. Complaints have been very few and I think that the service is quite satisfactory and economical.

The scheme for the provision of dustbins by the Council free to householders was commenced during April of this year and it is hoped that this will help greatly in the operation of the cleansing service.

Work has continued on the making of the extension to the existing playing field on the Lime Pit Lane site by means of controlled tipping. In other cases the refuse collected is disposed of by tipping on agricultural land. There appears to be adequate tipping space available in all parts of the district for many years to come.

Petroleum Spirit Stores.

During the year 18 licences have been issued to premises to permit of the storage of petroleum spirits. Of these 15 were renewals of existing licences and 3 new licences.

Regular visits are made to the premises to see that the regulations and safety precautions are being carried out.

Miscellaneous Table.

Letters sent out—General	...	...	3050
Informal notices--Housing	...	...	852
Legal notices—Abatement of Nuisances		...	8

I remain, Gentlemen,

Your obedient servant,

D. WALKER.

